## Application for Research Students, October 2025

Fill out the application by following the provided sample, and check the appropriate boxes  $\square$  as shown below.

Application Submission Date: Kana Name (in Japanese) Photo signature  $(4\times3)$ Taken within Name the last 6 (Roman alphabet) months Name (Native language) ☐ Male Birthday Gender ☐ Female (Age: E-mail Nationality **Current Status** Details of your current university, Japanese language school or occupation. Name of organization: □a student □an employment □an unemployment  $\Box$  others Address: Zip Code: Tel: Current Living Address \*Write a mail address Zip Code: UEC send documents Tel: Home Address Zip Code: Tel: \*If the guarantor is not in Japan, please enter the guarantor in your home Guarantor in Japan \*Friends are not eligible to act as guarantors. Name: Relationship to the Applicant: Profession: Address: Zip Code: Tel: E-mail: \* Please ensure that the information is filled in accurately, as we may contact your guarantor directly regarding the details.

Last Academic	2		ame of school:								
Background		epartment:									
*Last academi	c school	Ma	ajor:								
received a degr	ee.										
Do not include	any										
Japanese langu	ıage	Gra	aduateo	d/Expecte	d graduate dates:						
school	_										
Subject of Stu	ıdy										
		l .	Name	of an ac	cademic supervisor:						
Confirmation of an academic supervisor and a head of			Name of department:								
department			Please ask your academic supervisor to fill out the "Academic Supervisor								
			Confirmation Form (Form 3)" and submit it to the International Student								
					ISO considers your application approved by directly receivi						
			ng it from the supervisor.								
			*It would be very appreciated if an academic supervisor could explain								
			the acceptance of the student to the head of department and obtain								
			appro	-	e of the student to the head of department and obtain						
			appro	ovai.							
Do you take a			If you answer ∠Yes, write the name of university and department/Cours								
entrance exam	ination?		e								
□ Yes □ No			Name of the university:								
			Department/Course:								
			•								
Who will ACT	UALLY		Name:								
do the bank t	ransfer to										
pay the applic	ation fee	?	D 1 ( 1 ) ( 1 A 1 ) ( D 1 ) 1 ( 1 ) 10 ( 1 )								
(For overseas	annlicant	Q	Relationship to the Applicant :   the applicant himself/herself  others (								
please ask son	neone res	sidi	)								
ng in Japan t	o handle	the									
transfer procedures, as			E-mail:								
only domestic bank transf er can be accepted.)											
	1	D	ation	W							
		(Ye		Year/ Month	Educational and Career Background						
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Others											

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Ι	pledge	that	the	information	given	in	this	application	form	is	true	and	accurate.

(Year)	/ (Month)	/(Day)	
Applicar	nt's Signatu	re	